



STATEMENT OF INTERESTS

INSTRUCTIONS: This form must be used to report all interests required to be disclosed under the Conflict of Interest Disclosure Act (Tennessee Code Annotated §8—50—501, et seq.) Disclosure statements must be filed annually by January 15 by officeholders, no later than ten (10) days following the qualifying deadline for candidates and within twenty (20) days from the date of appointment for appointees. Amended disclosures must be filed whenever reported conditions change because of the termination or acquisition of interests for which disclosure is required.

Individuals holding or seeking state offices specified in T.C.A. §8—50—501 must file their disclosure statements with the Registry of Election Finance, 404 James Robertson Parkway, Suite 1614, Nashville, TN 37243-1360. Individuals holding or seeking elected city or county office must file their reports with the county election commission.

Officeholders may complete items 1.-4. and skip to item 15. if there has been no change in condition since the previous report. The disclosure statement must be signed and notarized in item 16. Attach additional pages as necessary. Please type or print all information in black ink.

1. DATE OF DISCLOSURE

Feb 6, 1994

2. NAME OF OFFICIAL OR CANDIDATE

Robert J. Mullin

3. ADDRESS AND PHONE

Street or Rural Route

City

State

Zip Code

Phone

9216 LAKEWOOD Circle, Soddy, Daisy TN 37379 (615) 842-0493

4. TITLE OF OFFICE HELD OR SOUGHT (include district number, if applicable)

Commissioner - City of Lakeside

5. SOURCES OF INCOME: In general terms list major source or sources of your private income and that of your spouse or minor children residing with you. No firm or organization nor dollar amount need be stated.

Self: Project Management/Engineering - TVA

Spouse: Nursing

6. INVESTMENTS: List any investment by you, your spouse or minor children residing with you in any corporation or other business organization in excess of five thousand dollars (\$5,000) or five percent (5%) of the total capital. It shall be sufficient to identify the industry. No firm or organization need be named nor dollar amounts or percentages stated.

Power Generation

Pharmaceutical

7. OFFICES, DIRECTORSHIPS, EMPLOYMENT: List offices, directorships and salaried employments held by you, your spouse or minor children residing with you. It shall be sufficient to identify the industry. No firm or organization need be named nor dollar amounts stated.

Self: Power Generation

Spouse: Nursing

8. LOBBYING: List any person, firm or organization for whom compensated lobbying is done by any associate, your spouse or minor children residing with you. Also, list any firm in which you, your spouse or minor children residing with you hold any interest for whom compensated lobbying is done. Explain the terms of any such employment and the measures to be supported or opposed.

None

9. PROFESSIONAL SERVICES: List in general terms (by areas of the client's interests) the entities to which professional services, such as those of an attorney, accountant or architect, are furnished by you or your spouse.

None